

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Northern District of Texas

Case number (If known): _____

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

6/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Timothy

First name

Ragster

Middle name

Last name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and doing business as names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 9 1 6 4

OR

9 xx - xx - _____

xxx - xx - _____

OR

9 xx - xx - _____

About Debtor 1:**4. Your Employer****Identification Number (EIN), if any.**

EIN _____

EIN _____

EIN _____

EIN _____

About Debtor 2 (Spouse Only in a Joint Case):

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live**2607 Summer Tree Circle**

Number Street _____

#1049 _____

Arlington TX 76006

City State ZIP Code _____

Tarrant County _____

County _____

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street _____

P.O. Box _____

City State ZIP Code _____

If Debtor 2 lives at a different address:

Number Street _____

City State ZIP Code _____

County _____

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street _____

P.O. Box _____

City State ZIP Code _____

6. Why you are choosing this district to file for bankruptcy**Check one:** Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain.

(See 28 U.S.C. § 1408.)

Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain.

(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No
 Yes.

District Texas-Northern- Ft. Worth When 12/06/2024 Case number 22-42825-ELM-7

District _____ When _____ Case number _____

District _____ When _____ Case number _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No
 Yes.

Debtor _____ Relationship to you _____

District _____ When _____ Case number, if known _____

Debtor _____ Relationship to you _____

District _____ When _____ Case number, if known _____

11. Do you rent your residence?

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?** No. Go to Part 4. Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
 Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

 No Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.
 Yes. Go to line 17.

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

No. I am not filing under Chapter 7. Go to line 18.

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No
 Yes

18. How many creditors do you estimate that you owe?

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input checked="" type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Timothy Ragster

Signature of Debtor 1

Executed on 06/30/2025

MM / DD / YYYY



Signature of Debtor 2

Executed on

MM / DD / YYYY

For your attorney, if you are represented by one**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Guy Holman

Signature of Attorney for Debtor

Date

06/30/2025

MM / DD / YYYY

Guy Holman

Printed name

Guy Harvey Holman, PLLC

Firm name

8330 Lyndon B Johnson Fwy

Number Street

Suite 445

Dallas

TX

75243

City

State

ZIP Code

Contact phone **972-325-2900**

Email address **gholman@debtreset.net**

24095171

TX

Bar number

State

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number	(If known)		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets	
Value of what you own	
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$ <u>49,453.00</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u>\$ 49,453.00</u>

Part 2: Summarize Your Liabilities

Your liabilities	
Amount you owe	
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	\$ <u>52,597.00</u>
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ <u>20,659.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u>+ \$ 314,193.02</u>
Your total liabilities	
	<u>\$ 387,449.02</u>

Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ <u>1,166.05</u>
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ <u>4,879.00</u>

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 1,166.05

9. Copy the following special categories of claims from Part 4, line 6 of **Schedule E/F**.

Total claim

From Part 4 on **Schedule E/F**, copy the following:

9a. Domestic support obligations (Copy line 6a.)	\$ <u>20,659.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<u>+</u> \$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>20,659.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number			

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1. Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.2. Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

Who has an interest in the property? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

1. _____

Street address, if available, or other description _____

What is the property? Check all that apply.

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property? Current value of the portion you own?**

\$ _____ \$ _____

City _____ State _____ ZIP Code _____

County _____

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

 Check if this is community property (see instructions)**Other information you wish to add about this item, such as local property identification number:** _____

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. → \$ 0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1. Make: toyato**Who has an interest in the property?** Check one.Model: trundra

Debtor 1 only

Year: 2022

Debtor 2 only

Approximate mileage: 141000.0

Debtor 1 and Debtor 2 only

Other information:

At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property? Current value of the portion you own?**

\$ 39,938.00 \$ 39,938.00

Condition: Excellent

 Check if this is community property (see instructions)

If you own or have more than one, describe here:

3.2. Make: _____

Who has an interest in the property? Check one.

Model: _____

Debtor 1 only

Year: _____

Debtor 2 only

Approximate mileage: _____

Debtor 1 and Debtor 2 only

Other information:

At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property? Current value of the portion you own?**

\$ _____ \$ _____

 Check if this is community property (see instructions)

_____. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:
Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****Current value of the portion you own?**

\$ _____ \$ _____

_____. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:
Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****Current value of the portion you own?**

\$ _____ \$ _____

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories*Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes

4.1. Make: _____

Model: _____

Year: _____

Other information:
Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****Current value of the portion you own?**

\$ _____ \$ _____

If you own or have more than one, list here:

4.2. Make: _____

Model: _____

Year: _____

Other information:
Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****Current value of the portion you own?**

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ➔

\$ 39,938.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

 No Yes. Describe.....

home furniture-Bedroom Set, Dinette set, mattress, pots, pans, utensils, linen

\$ 2,000.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe.....

Tv, Cell phone

\$ 300.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....

\$ 0.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....

\$ 0.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.....

pistol 45

\$ 350.00

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.....

Clothing (Adult)

\$ 600.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.....

Watch

\$ 250.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

 No Yes. Describe.....

\$ 0.00

14. Any other personal and household items you did not already list, including any health aids you did not list

 No Yes. Give specific information.....

\$ 0.00

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

→ \$ 3,500.00

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....

Cash:

\$

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking account:	PNC Bank	\$ 15.00
17.2. Checking account:	PNC Bank	\$ 6,000.00
17.3. Savings account:		\$ _____
17.4. Savings account:		\$ _____
17.5. Certificates of deposit:		\$ _____
17.6. Other financial account:		\$ _____
17.7. Other financial account:		\$ _____
17.8. Other financial account:		\$ _____
17.9. Other financial account:		\$ _____

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

_____	\$ _____
_____	\$ _____
_____	\$ _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.

Name of entity:

Lifetime CDL Training Academy, LLC	% of ownership:
	50.00 % \$ 0.00
	_____ % \$ _____
	_____ % \$ _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them.

Issuer name:

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Institution name:
Type of account:

401(k) or similar plan: _____ \$ _____

Pension plan: _____ \$ _____

IRA: _____ \$ _____

Retirement account: _____ \$ _____

Keogh: _____ \$ _____

Additional account: _____ \$ _____

Additional account: _____ \$ _____

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes..... Institution name or individual:

Electric: _____ \$ _____

Gas: _____ \$ _____

Heating oil: _____ \$ _____

Rental unit: _____ \$ _____

Prepaid rent: _____ \$ _____

Telephone: _____ \$ _____

Water: _____ \$ _____

Rented furniture: _____ \$ _____

Other: _____ \$ _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes..... Issuer name and description:

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____ \$ _____
 _____ \$ _____
 _____ \$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them.

_____ \$ 0.00

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them.

_____ \$ 0.00

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them.

_____ \$ 0.00

Money or property owed to you?**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal:	\$ 0.00
State:	\$ 0.00
Local:	\$ 0.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.

Alimony:	\$ 0.00
Maintenance:	\$ 0.00
Support:	\$ 0.00
Divorce settlement:	\$ 0.00
Property settlement:	\$ 0.00

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information.

_____ \$ 0.00

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company _____ Company name: _____ of each policy and list its value.

Beneficiary: _____

Surrender or refund value: _____

\$ _____

\$ _____

\$ _____

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information.

\$ 0.00

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.

\$ 0.00

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No Yes. Describe each claim.

\$ 0.00

35. Any financial assets you did not already list No Yes. Give specific information.

\$ 0.00

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here →

\$ 6,015.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?** No. Go to Part 6. Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned No Yes. Describe.

\$ _____

39. Office equipment, furnishings, and supplies*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No Yes. Describe.

\$ _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

 No Yes. Describe.....

\$

41. Inventory

 No Yes. Describe.....

\$

42. Interests in partnerships or joint ventures

 No Yes. Describe..... Name of entity:

% of ownership:

_____	_____ %	\$ _____
_____	_____ %	\$ _____
_____	_____ %	\$ _____

43. Customer lists, mailing lists, or other compilations

 No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

\$

44. Any business-related property you did not already list

 No Yes. Give specific information

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here



\$ 0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

 No. Go to Part 7. Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes.....

\$

48. Crops—either growing or harvested

 No Yes. Give specific information.

\$ _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes.

\$ _____

50. Farm and fishing supplies, chemicals, and feed

 No Yes.

\$ _____

51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information.

\$ _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$ 0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$ 0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 → \$ 0.00

56. Part 2: Total vehicles, line 5 \$ 39,938.00

57. Part 3: Total personal and household items, line 15 \$ 3,500.00

58. Part 4: Total financial assets, line 36 \$ 6,015.00

59. Part 5: Total business-related property, line 45 \$ 0.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61. → + \$ 49,453.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.

\$ 49,453.00

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (if known)		-----	

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: Household Goods - home furniture-Bedroom Set, Dinette set, mattress, pots, pans, utensils, linens	Copy the value from <i>Schedule A/B</i> \$ 2,000.00	Check only one box for each exemption <input checked="" type="checkbox"/> \$ 2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 6 Brief description: Electronics - Tv, Cell phone	\$ 300.00	<input checked="" type="checkbox"/> \$ 300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 7 Brief description: Firearms - pistol 45	\$ 350.00	<input checked="" type="checkbox"/> \$ 350.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 USC § 522(d)(3)
Line from <i>Schedule A/B</i> : 10			

3. Are you claiming a homestead exemption of more than \$214,000?

(Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No
 Yes

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim	Specific laws that allow exemption
Clothing - Clothing (Adult)	\$ 600.00	<input checked="" type="checkbox"/> \$ 600.00	11 USC § 522(d)(3)
Brief description:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 11			
Jewelry - Watch	\$ 250.00	<input checked="" type="checkbox"/> \$ 250.00	11 USC § 522(d)(4)
Brief description:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 12			
PNC Bank (Checking Account)	\$ 15.00	<input checked="" type="checkbox"/> \$ 15.00	11 USC § 522(d)(5)
Brief description:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 17.1			
PNC Bank (Checking Account)	\$ 6,000.00	<input checked="" type="checkbox"/> \$ 6,000.00	11 U.S.C. § 522 (d)(5)
Brief description:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 17.2			
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<input type="checkbox"/> \$	
Line from Schedule A/B:		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1	Timothy Ragster	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Last Name	
	First Name	Middle Name
United States Bankruptcy Court for the: Northern District of Texas		
Case number (if known)		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.1 Corporation Service Company, As Representative	Describe the property that secures the claim: - \$0.00	\$ 0.00	\$ 0.00
Creditor's Name PO BOX 2576			
Number Street			
Springfield IL 62708-257			
City State ZIP Code			
Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.		
<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim relates to a community debt	<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		
Date debt was incurred 03/14/2023	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)		
	<input type="checkbox"/> Judgment lien from a lawsuit		
	<input type="checkbox"/> Other (including a right to offset) _____		
	Last 4 digits of account number 230010706403		
2.2 Unify Financial Fcu	Describe the property that secures the claim: 2022 toyato trundra - \$39,938.00	\$ 52,597.00	\$ 39,938.00
Creditor's Name 9323 Bellanca Ave			
Number Street			
Los Angeles CA 90045			
City State ZIP Code			
Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.		
<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim relates to a community debt	<input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		
Date debt was incurred 07-22-2022	<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)		
	<input type="checkbox"/> Judgment lien from a lawsuit		
	<input type="checkbox"/> Other (including a right to offset) _____		
	Last 4 digits of account number 0350		
Add the dollar value of your entries in Column A on this page. Write that number here: \$ 52,597.00			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name _____

Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number

Name _____

Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number

Name _____

Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number

Name _____

Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number

Name _____

Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number

Name _____

Street _____

City _____ State _____ ZIP Code _____

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (if known)			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	Oag Child Support			
	Priority Creditor's Name Po Box 12017	Last 4 digits of account number 8799	\$ 20,659.00	\$ 20,659.00 \$ 0.00
	Number Street	When was the debt incurred? <u>02-18-2024</u>		
	Austin TX 78711	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Type of PRIORITY unsecured claim: <input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.2		Last 4 digits of account number	\$	\$
	Priority Creditor's Name	When was the debt incurred?		
	Number Street	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

ACG Equipment Finance

Total claim

4.1

Nonpriority Creditor's Name
9436 Hamilton Drive

Number Street

Last 4 digits of account number

\$ Unknown

When was the debt incurred? _____

Mentor OH 44060-8708
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify personal guarantee on business debt

4.2

AIS Portfolio Services, LLC

\$ Unknown

Nonpriority Creditor's Name
4515 N SANTA FE AVE

Number Street

Last 4 digits of account number

\$ Unknown

When was the debt incurred? _____

Oklahoma City OK 73118
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify personal guarantee on business debt

4.3

Alexnadra E. Rossetti

\$ 19,272.50

Nonpriority Creditor's Name
Thompson Coburn LLP 2100 Ross AvenueNumber Street
Suite 3200

Last 4 digits of account number

\$ 19,272.50

Dallas TX 75201
City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

At least one of the debtors and another

 Check if this claim is for a community debt

Is the claim subject to offset?

No

Yes

As of the date you file, the claim is: Check all that apply.

Contingent

Unliquidated

Disputed

Type of NONPRIORITY unsecured claim:

Student loans

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other. Specify personal guarantee on business debt

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.4	Amazon Business Card			Total claim
Nonpriority Creditor's Name P.O. Box 6031 Number Street			Last 4 digits of account number When was the debt incurred?	
Carol Stream IL 60197-6031 City State ZIP Code			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one.			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
4.5	America Inc.,			\$ Unknown
Nonpriority Creditor's Name One Pierce Place Number Street Suite 1100			Last 4 digits of account number When was the debt incurred?	
Itasca IL 60143 City State ZIP Code			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one.			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
4.6	American Bank, N.A. d/b/a ACG Equipment Finance			\$ 0.00
Nonpriority Creditor's Name 111 Congress Avenue Number Street			Last 4 digits of account number When was the debt incurred?	
Austin TX 78701-4093 City State ZIP Code			As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one.			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.7	American Express			Total claim
		Nonpriority Creditor's Name	Last 4 digits of account number	\$ <u>Unknown</u>
PO Box 6031		When was the debt incurred?		
Number	Street			
Carol Stream IL 60197-6031		As of the date you file, the claim is: Check all that apply.		
City	State ZIP Code	<input type="checkbox"/> Contingent		
Who incurred the debt? Check one.		<input type="checkbox"/> Unliquidated		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.8	American Express	Nonpriority Creditor's Name	Last 4 digits of account number	\$ <u>Unknown</u>
PO Box 6031		When was the debt incurred?		
Number	Street			
Carol Stream IL 60197-6031		As of the date you file, the claim is: Check all that apply.		
City	State ZIP Code	<input type="checkbox"/> Contingent		
Who incurred the debt? Check one.		<input type="checkbox"/> Unliquidated		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.9	American Express National Bank	Nonpriority Creditor's Name	Last 4 digits of account number	\$ <u>Unknown</u>
C/O Becket and Lee LLP		When was the debt incurred?		
Number	Street			
PO Box 3001				
Malvern PA 19355-0701		As of the date you file, the claim is: Check all that apply.		
City	State ZIP Code	<input type="checkbox"/> Contingent		
Who incurred the debt? Check one.		<input type="checkbox"/> Unliquidated		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.10	Amex/Cbna		
Nonpriority Creditor's Name Po Box 8218 Number Street			Last 4 digits of account number 0387 When was the debt incurred? 08-16-2013 \$ 0.00
Mason OH 45040 City State ZIP Code			As of the date you file, the claim is: Check all that apply.
Who incurred the debt? Check one.			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			Type of NONPRIORITY unsecured claim:
<input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt
Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
4.11	Ascentium Capital LLC		
Nonpriority Creditor's Name PO Box 979059 Number Street Suite 1210 Ft. Worth City State ZIP Code			Last 4 digits of account number When was the debt incurred? \$ Unknown
Who incurred the debt? Check one.			As of the date you file, the claim is: Check all that apply.
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<input type="checkbox"/> Check if this claim is for a community debt			Type of NONPRIORITY unsecured claim:
Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
4.12	Ascentium Capital LLC		
Nonpriority Creditor's Name PO Box 979059 Number Street Miami FL 33197-9059 City State ZIP Code			Last 4 digits of account number When was the debt incurred? \$ 0.00
Who incurred the debt? Check one.			As of the date you file, the claim is: Check all that apply.
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<input type="checkbox"/> Check if this claim is for a community debt			Type of NONPRIORITY unsecured claim:
Is the claim subject to offset?			<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

	Attorney General of Texas	Total claim	
		Last 4 digits of account number	\$ Unknown
4.13	<p>Nonpriority Creditor's Name Bankruptcy Division Number Street P.O. Box 12548</p> <p>Austin TX 78711-2540 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input checked="" type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____</p>	
4.14	<p>Banc of America Leasing & Capital, LLC c/o Clark Hill PLC</p> <p>Nonpriority Creditor's Name Attn: Andrew G. Edson Number Street 901 Main Street Suite 6000</p> <p>Dallas TX 75202-3748 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number \$ Unknown</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>	
4.15	<p>Banterra Bank</p> <p>Nonpriority Creditor's Name 3201 Banterra Drive Number Street PO Box 310</p> <p>Marion IL 62959-0310 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number \$ Unknown</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>	

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.16	BMO Harris Bank NA	Total claim	
		Last 4 digits of account number	\$ Unknown
<p>Nonpriority Creditor's Name PO Box 35704</p> <p>Number Street</p> <p>Billing MT 59107-5704 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>			
4.17	Capital One	Last 4 digits of account number 8355	\$ 0.00
<p>Nonpriority Creditor's Name Po Box 85064</p> <p>Number Street</p> <p>Glen Allen VA 23058 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>			
4.18	Capital One	Last 4 digits of account number	\$ 0.00
<p>Nonpriority Creditor's Name P.O. Box 71141</p> <p>Number Street</p> <p>Charlotte NC 28272-1141 City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify</p>			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.19	Capital One, N.A., c/o AIS Portfolio Service	Total claim	
		Last 4 digits of account number	\$ Unknown
Nonpriority Creditor's Name 4515 N Santa Fe Ave. Dept. APS		When was the debt incurred? _____	
Number Street		As of the date you file, the claim is: Check all that apply.	
Oklahoma City OK 73118-901		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
City State ZIP Code		Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Check if this claim is for a community debt <input type="checkbox"/>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.20	Capitol One, c/o AIS	Last 4 digits of account number	\$ Unknown
Nonpriority Creditor's Name 4515 N. Santa Fe Ave.		When was the debt incurred? _____	
Number Street		As of the date you file, the claim is: Check all that apply.	
Oklahoma City OK 73118-7901		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
City State ZIP Code		Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Check if this claim is for a community debt <input type="checkbox"/>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.21	Ccb/Zalescc	Last 4 digits of account number 2119	\$ 0.00
Nonpriority Creditor's Name Po Box 182120		When was the debt incurred? 12-12-2022	
Number Street		As of the date you file, the claim is: Check all that apply.	
Columbus OH 43218		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
City State ZIP Code		Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	
Check if this claim is for a community debt <input type="checkbox"/>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.22	Comptroller of Public Accts Revenue Acctg Div Bankruptcy Sec		
Nonpriority Creditor's Name P.O. Box 13528 Number Street City Austin TX 78711 State ZIP Code			Last 4 digits of account number \$ 0.00 When was the debt incurred?
Who incurred the debt? Check one. <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>			
As of the date you file, the claim is: Check all that apply. <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			Type of NONPRIORITY unsecured claim: <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>
4.23	Credence Resource Mana		
Nonpriority Creditor's Name 17000 Dallas Pkwy Ste 20 Number Street City Dallas TX 75248 State ZIP Code			Last 4 digits of account number 0955 \$ 484.00 When was the debt incurred? 02-03-2025
Who incurred the debt? Check one. <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>			
As of the date you file, the claim is: Check all that apply. <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			Type of NONPRIORITY unsecured claim: <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Collection Agency</p>
4.24	Discover Bank		
Nonpriority Creditor's Name Po Box 15316 Number Street City Wilmington DE 19850 State ZIP Code			Last 4 digits of account number 1602 \$ 28,693.00 When was the debt incurred? 05-08-2007
Who incurred the debt? Check one. <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>			
As of the date you file, the claim is: Check all that apply. <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			Type of NONPRIORITY unsecured claim: <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

	Nonpriority Creditor's Name	Total claim	
		Last 4 digits of account number	\$ _____
4.25	Engs Commercial Finance Co. c/o Kemp Smith LLP	When was the debt incurred?	_____
Number Street		As of the date you file, the claim is: Check all that apply.	
El Paso TX 79901-1401		<input type="checkbox"/> Contingent	
City State ZIP Code		<input type="checkbox"/> Unliquidated	
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed	
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
4.26	Engs Commercial Finance Co. c/o Kemp Smith LLP	Last 4 digits of account number	\$ Unknown
Number Street		When was the debt incurred?	_____
El Paso TX 79901-1401		As of the date you file, the claim is: Check all that apply.	
City State ZIP Code		<input type="checkbox"/> Contingent	
Who incurred the debt? Check one.		<input type="checkbox"/> Unliquidated	
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Disputed	
<input type="checkbox"/> Debtor 2 only		Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Student loans	
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input type="checkbox"/> Check if this claim is for a community debt		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		<input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
4.27	Internal Revenue Service	Last 4 digits of account number	\$ Unknown
Number Street		When was the debt incurred?	_____
P.O.Box 7346		As of the date you file, the claim is: Check all that apply.	
Philadelphia PA 19101-7346		<input type="checkbox"/> Contingent	
City State ZIP Code		<input type="checkbox"/> Unliquidated	
Who incurred the debt? Check one.		<input type="checkbox"/> Disputed	
<input checked="" type="checkbox"/> Debtor 1 only		Type of NONPRIORITY unsecured claim:	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Student loans	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<input type="checkbox"/> At least one of the debtors and another		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
<input type="checkbox"/> Check if this claim is for a community debt		<input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Creditor's Name	Total claim		
	Number	Street	ZIP Code
4.28 Internal Revenue Service	\$ 0.00		
Nonpriority Creditor's Name 1100 Commerce St	Last 4 digits of account number		
Number Street	When was the debt incurred?		
Dallas TX 75242-1100	As of the date you file, the claim is: Check all that apply.		
City	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify		
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.29 IPFS Corporation	\$ Unknown		
Nonpriority Creditor's Name 30 Montgomery Street	Last 4 digits of account number		
Number Street	When was the debt incurred?		
Suite 501 Jersey City NJ 07302-3821	As of the date you file, the claim is: Check all that apply.		
City	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt		
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.30 Jpmcb Card	\$ 6,998.00		
Nonpriority Creditor's Name 201 N Walnut St	Last 4 digits of account number 4957		
Number Street	When was the debt incurred? 02-23-2009		
Wilmington DE 19801	As of the date you file, the claim is: Check all that apply.		
City	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify		
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.31	Jpmcb Card		
Nonpriority Creditor's Name 301 N Walnut St, Floor 09 Number Street			Last 4 digits of account number 0330 When was the debt incurred? 07-06-2006 \$ 0.00
Wilmington DE 19801 City State ZIP Code			As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
4.32	JPMorgan Chase Bank, N.A.		
Nonpriority Creditor's Name C/O National Bankruptcy Services, LLC Number Street PO Box 9013			Last 4 digits of account number When was the debt incurred? _____ \$ Unknown
City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.33	Landstar Contractor Financing Inc.		
Nonpriority Creditor's Name 13410 Sutton Park Dr. South Number Street			Last 4 digits of account number When was the debt incurred? _____ \$ Unknown
Jacksonville FL 32224-5270 City State ZIP Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.34	LBC Capital Inc. c/o Quilling, Selander, Lownds, et al.	Total claim							
		Last 4 digits of account number	\$ 0.00						
<p>Nonpriority Creditor's Name Attn: Kenneth A. Hill</p> <p>Number Street 2001 Bryan Street Suite 1800</p> <table> <tr> <td>Dallas</td> <td>TX</td> <td>75201-3071</td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> </table> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				Dallas	TX	75201-3071	City	State	ZIP Code
Dallas	TX	75201-3071							
City	State	ZIP Code							
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify</p>									
4.35	Lvng Funding Llc	Last 4 digits of account number 5712	\$ 3,719.00						
<p>Nonpriority Creditor's Name Po Box 10497</p> <p>Number Street</p> <table> <tr> <td>Greenville</td> <td>SC</td> <td>29603</td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> </table> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				Greenville	SC	29603	City	State	ZIP Code
Greenville	SC	29603							
City	State	ZIP Code							
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify</p>									
4.36	Marlin Leasing Corporation	Last 4 digits of account number	\$ Unknown						
<p>Nonpriority Creditor's Name PO Box 13604</p> <p>Number Street</p> <table> <tr> <td>Philadelphia</td> <td>PA</td> <td>19101-3604</td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> </table> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				Philadelphia	PA	19101-3604	City	State	ZIP Code
Philadelphia	PA	19101-3604							
City	State	ZIP Code							
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>									

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.37	Mercedes-Benz Financial			Total claim
		Nonpriority Creditor's Name	Last 4 digits of account number	\$ Unknown
13650 Heritage Parkway		When was the debt incurred?		
Number	Street			
Fort Worth TX 76177-5323		As of the date you file, the claim is: Check all that apply.		
City	State	<input type="checkbox"/> Contingent		
	ZIP Code	<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.38	Midland Credit Managem	Last 4 digits of account number	5532	\$ 14,268.00
Nonpriority Creditor's Name		When was the debt incurred?	01-29-2024	
Number	Street	As of the date you file, the claim is: Check all that apply.		
San Diego CA		<input type="checkbox"/> Contingent		
City	State	<input type="checkbox"/> Unliquidated		
	ZIP Code	<input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.39	Mitsubishi HC Capital America, Inc. c/o Kemp Smith LLP	Last 4 digits of account number	\$ Unknown	
Nonpriority Creditor's Name		When was the debt incurred?		
221 N. Kansas, Ste. 1700		As of the date you file, the claim is: Check all that apply.		
Number	Street	<input type="checkbox"/> Contingent		
El Paso TX 79901-1401		<input type="checkbox"/> Unliquidated		
City	State	<input type="checkbox"/> Disputed		
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans				
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts				
<input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt				
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only				
<input type="checkbox"/> Debtor 2 only				
<input type="checkbox"/> Debtor 1 and Debtor 2 only				
<input type="checkbox"/> At least one of the debtors and another				
Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.40	Msdhs/Metss				Total claim
					Last 4 digits of account number 0574
Nonpriority Creditor's Name 750 North State St		When was the debt incurred? 07-01-2009			
Number Street					
Jackson		MS	39202		
City		State	ZIP Code		
Who incurred the debt? Check one.					
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another					
<input type="checkbox"/> Check if this claim is for a community debt					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
4.41	Navient				Last 4 digits of account number 0623
					When was the debt incurred? 06-23-2006
Nonpriority Creditor's Name Po Box 9500					
Number Street					
Wilkes Barre		PA	18773		
City		State	ZIP Code		
Who incurred the debt? Check one.					
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another					
<input type="checkbox"/> Check if this claim is for a community debt					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					
4.42	Northpoint Commercial Finance, LLC				Last 4 digits of account number
					When was the debt incurred?
Nonpriority Creditor's Name 11675 Rainwater Drive, Suite 450					
Number Street					
Alpharetta		GA	30009-8686		
City		State	ZIP Code		
Who incurred the debt? Check one.					
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another					
<input type="checkbox"/> Check if this claim is for a community debt					
Is the claim subject to offset?					
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.43	Northpoint Commercial Finance LLC c/o Quilling, Selander, Lowne		
Nonpriority Creditor's Name Attn: Kenneth A. Hill Number Street 2001 Bryan Street Suite 1800 PMB 902			Last 4 digits of account number \$ 0.00
Mansfiled TX 76063-3376 City State ZIP Code			When was the debt incurred?
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.44	Portfolio Recov Assoc		
Nonpriority Creditor's Name 120 Corporate Blvd Ste 1			Last 4 digits of account number 8944 \$ 8,838.00
Number Street			When was the debt incurred? 02-16-2024
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt			
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.45	Portfolio Recov Assoc		
Nonpriority Creditor's Name 120 Corporate Blvd Ste 1			Last 4 digits of account number 1252 \$ 4,612.00
Number Street			When was the debt incurred? 01-26-2024
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify			
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Check if this claim is for a community debt			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.46	Quantum 222 Trust	Total claim	
		Last 4 digits of account number	\$ Unknown
<p>Nonpriority Creditor's Name 9300 Metcalf Avenue Number Street</p> <p>Overland KS 66212-1463 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>			
4.47	Ragster Investment Group, Inc.	\$ 0.00	
<p>Nonpriority Creditor's Name 1301 Debbie Lane Number Street STE 102</p> <p>Mansfield TX 76063-3376 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>			
4.48	Rosen Systems, Inc.	\$ Unknown	
<p>Nonpriority Creditor's Name 2323 Langford St. Number Street</p> <p>Dallas TX 75208-2122 City State ZIP Code</p> <p>Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

#	Creditor's Name	Last 4 digits of account number	Total claim
4.49	Santander Bank, N.A.		\$ Unknown
Nonpriority Creditor's Name		When was the debt incurred?	
3 Huntington Quadrangle			
Number Street		As of the date you file, the claim is: Check all that apply.	
Suite 101 N		<input type="checkbox"/> Contingent	
Melville NY 11747-4623		<input type="checkbox"/> Unliquidated	
City State ZIP Code		<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
4.50	Santander Bank, N.A. c/o Padfield & Stout, LLP		\$ Unknown
Nonpriority Creditor's Name		When was the debt incurred?	
420 Throckmorton Street			
Number Street		As of the date you file, the claim is: Check all that apply.	
Suite 1210		<input type="checkbox"/> Contingent	
Ft. Worth TX		<input type="checkbox"/> Unliquidated	
City State ZIP Code		<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
4.51	Servicefin	Last 4 digits of account number 4982	\$ 0.00
Nonpriority Creditor's Name		When was the debt incurred? 08-29-2017	
555 South Federal Highway		As of the date you file, the claim is: Check all that apply.	
Number Street		<input type="checkbox"/> Contingent	
Boca Raton FL 33432		<input type="checkbox"/> Unliquidated	
City State ZIP Code		<input type="checkbox"/> Disputed	
Who incurred the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Creditor's Name	Address			Last 4 digits of account number	When was the debt incurred?	Type of NONPRIORITY unsecured claim:	Total claim
	Number	Street	City				
4.52 SG Equipment Finance USA Corp.	Nonpriority Creditor's Name c/o Peter Billgert Number Street 480 Washington Blvd						\$ 0.00
	Jersey City	NJ	07310-2053				
	City	State	ZIP Code				
Who incurred the debt? Check one.							
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another							
<input type="checkbox"/> Check if this claim is for a community debt							
Is the claim subject to offset?							
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes							
4.53 Signature Financial, LLC	Nonpriority Creditor's Name C/O Bronster, LLP Attn: J Number Street 156 West 56th Street, Suite 902						\$ Unknown
	New York	NY	10019-4008				
	City	State	ZIP Code				
Who incurred the debt? Check one.							
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another							
<input type="checkbox"/> Check if this claim is for a community debt							
Is the claim subject to offset?							
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes							
4.54 Signature Financial, LLC Condon Tobin Sladek Nerenberg, PLLC	Nonpriority Creditor's Name 8080 Park Lane, Suite 700 Number Street 901 Main Street Suite 6000						\$ Unknown
	Dallas	TX	75231-5920				
	City	State	ZIP Code				
Who incurred the debt? Check one.							
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another							
<input type="checkbox"/> Check if this claim is for a community debt							
Is the claim subject to offset?							
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes							

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
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4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.55	Small Business Lending Division	Total claim	
		Last 4 digits of account number	\$ Unknown
Nonpriority Creditor's Name PO Box 29482		When was the debt incurred? _____	
Number Street			
Phoenix AZ 85038-9482		As of the date you file, the claim is: Check all that apply.	
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Check if this claim is for a community debt <input type="checkbox"/>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Springoaks		Last 4 digits of account number 8237	\$ 1,176.00
Nonpriority Creditor's Name 1400 Crossways Boulevard Ste 1		When was the debt incurred? 01-26-2024	
Number Street		As of the date you file, the claim is: Check all that apply.	
Chesapeake VA 23320		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Check if this claim is for a community debt <input type="checkbox"/>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Sumitomo Mitsui Finance & Leasing Co.		Last 4 digits of account number	\$ Unknown
Nonpriority Creditor's Name 666 Third Avenue, 8th Floor		When was the debt incurred? _____	
Number Street		As of the date you file, the claim is: Check all that apply.	
New York NY 10017-4033		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
City State ZIP Code		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
Check if this claim is for a community debt <input type="checkbox"/>			
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

	Nonpriority Creditor's Name				Total claim \$ 0.00
		Number	Street	City	
4.58	Suntrust Bk				Last 4 digits of account number 2817 When was the debt incurred? 05-17-2012
	Nonpriority Creditor's Name Pob 3303				
	Number Street				
	Tampa	FL	33601		
	City	State	ZIP Code		
	Who incurred the debt? Check one.				
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
	Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.59	Syncb/Ashh				Last 4 digits of account number 3882 When was the debt incurred? 03-27-2011
	Nonpriority Creditor's Name C/O Po Box 981439				
	Number Street				
	El Paso	TX	79998		
	City	State	ZIP Code		
	Who incurred the debt? Check one.				
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
	Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.60	Syncb/Ccdstr				Last 4 digits of account number 3297 When was the debt incurred? 09-16-2015
	Nonpriority Creditor's Name C/O Po Box 965036				
	Number Street				
	Orlando	FL	32896		
	City	State	ZIP Code		
	Who incurred the debt? Check one.				
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
	Check if this claim is for a community debt				
	Is the claim subject to offset?				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Creditor's Name	Total claim		
	Nonpriority Creditor's Name	Last 4 digits of account number	\$
4.61 Texas Comptroller of Public Accounts, Revenue	c/o Sherri Simpson, Number Street PO Box 12548	When was the debt incurred?	Unknown
	Austin TX 78711-2548	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Type of NONPRIORITY unsecured claim:	
		<input type="checkbox"/> Student loans	
		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		<input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
		Is the claim subject to offset?	
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
4.62 The Lark Law Firm	Nonpriority Creditor's Name 777 Main Street	Last 4 digits of account number 00902	\$ 4,586.59
	Number Street	When was the debt incurred?	
	Fort Worth TX 76102	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Type of NONPRIORITY unsecured claim:	
		<input type="checkbox"/> Student loans	
		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		<input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt	
		Is the claim subject to offset?	
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
4.63 Tx Trust	Nonpriority Creditor's Name 425 W Jefferson	Last 4 digits of account number 0717	\$ 0.00
	Number Street	When was the debt incurred? 07-15-2017	
	Grand Prairie TX 75050	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Type of NONPRIORITY unsecured claim:	
		<input type="checkbox"/> Student loans	
		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		<input checked="" type="checkbox"/> Other. Specify	
		Is the claim subject to offset?	
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.64	UniFi Equipment Finance, Inc.	Total claim							
		Last 4 digits of account number	\$ Unknown						
<p>Nonpriority Creditor's Name Attn: Doc Dept.</p> <p>Number Street 801 W. Ellsworth Rd.</p> <table> <tr> <td>Ann Arbor</td> <td>MI</td> <td>48108-314</td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> </table> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				Ann Arbor	MI	48108-314	City	State	ZIP Code
Ann Arbor	MI	48108-314							
City	State	ZIP Code							
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>									
4.65	UniFi Equipment Finance, Inc. c/o Wright Law Group, Inc.	Last 4 digits of account number \$ Unknown							
<p>Nonpriority Creditor's Name C/o Wright Law Group, PLLC</p> <p>Number Street P. O. Box 105603 PMB 84356</p> <table> <tr> <td>Atlanta</td> <td>GA</td> <td>30348-5603</td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> </table> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				Atlanta	GA	30348-5603	City	State	ZIP Code
Atlanta	GA	30348-5603							
City	State	ZIP Code							
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>									
4.66	United States Trustee	Last 4 digits of account number \$ 0.00							
<p>Nonpriority Creditor's Name 1100 Commerce St</p> <p>Number Street Room 976</p> <table> <tr> <td>Dallas</td> <td>TX</td> <td>75242</td> </tr> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> </table> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>				Dallas	TX	75242	City	State	ZIP Code
Dallas	TX	75242							
City	State	ZIP Code							
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify</p>									

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
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4.67	<p>U.S. Small Business Administration</p> <p>Nonpriority Creditor's Name 200 W. Santa Ana Blvd.</p> <p>Number Street Suite 740</p> <p>City State ZIP Code Santa Ana CA 92701-7534</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			Last 4 digits of account number \$ Unknown
			<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>	
4.68	<p>U.S. Small Business Administration</p> <p>Nonpriority Creditor's Name 14925 Kingsport Road</p> <p>Number Street Fort Worth TX 76155-2243</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			Last 4 digits of account number \$ 50,000.00
			<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>	
4.69	<p>U.S. Small Business Administration</p> <p>Nonpriority Creditor's Name SBA Disaster Loan Service</p> <p>Number Street 1545 Hawkins Blvd Suite 202</p> <p>City State ZIP Code El Paso TX 79925-2654</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>			Last 4 digits of account number \$ 161,507.34
			<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>	

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	Volvo Financial Services	Total claim	
		Last 4 digits of account number	\$ Unknown
4.70	<p>Nonpriority Creditor's Name Attn: Customer Service 7025 Albert Pick Rd.</p> <p>Number Street Suite 105</p> <p>Greensboro NC 27402-6131</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>	
4.71	<p>Nonpriority Creditor's Name PO Box 29482</p> <p>Number Street</p> <p>Phoenix AZ 85038-9482</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify personal guarantee on business debt</p>	
4.72	<p>Nonpriority Creditor's Name Po Box 14517</p> <p>Number Street</p> <p>Des Moines IA 50306</p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number 3250</p>	<p>\$ 2,693.00</p>
	<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt</p>		

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Jpmcb Card

Name _____

800 Brookside Blvd

Number Street _____

Westerville OH 43081
City State ZIP Code _____

Navient

Name _____

Po Box 9655

Number Street _____

Wilkes Barre PA 18773
City State ZIP Code _____

Name _____

Number Street _____

City State ZIP Code _____

Name _____

Number Street _____

City State ZIP Code _____

Name _____

Number Street _____

City State ZIP Code _____

Name _____

Number Street _____

City State ZIP Code _____

Name _____

Number Street _____

City State ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.31 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5017

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.41 of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 3610

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

Total claim		
Total claims from Part 1	6a. Domestic support obligations	6a. \$ <u>20,659.00</u>
	6b. Taxes and certain other debts you owe the government	6b. \$ <u>0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ <u>0.00</u>
6e. Total. Add lines 6a through 6d.	6e. \$ <u>20,659.00</u>	

Total claim		
Total claims from Part 2	6f. Student loans	6f. \$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ <u>309,606.43</u>
	6j. Total. Add lines 6f through 6i.	6j. \$ <u>309,606.43</u>

Fill in this information to identify your case:

Debtor	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the Northern District of Texas			
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease			State what the contract or lease is for		
2.1	Name					
	Street					
	City	State	ZIP Code			
2.2	Name					
	Street					
	City	State	ZIP Code			
2.3	Name					
	Street					
	City	State	ZIP Code			
2.4	Name					
	Street					
	City	State	ZIP Code			
2.5	Name					
	Street					
	City	State	ZIP Code			

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (If known) _____			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include

Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? TX. Fill in the name and current address of that person.

Trinise Mims Ragster (DSO)

Name of your spouse, former spouse, or legal equivalent

521 N. Walnut Creek Drive

Number Street

Mansfield

TX

76063

City

State

ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Global Evolution Logistics, LLC

Name

521 N. Walnut Creek Drive

Street

Mansfield

TX

76063-3205

City

State

ZIP Code

Schedule D, line 2.1

Schedule E/F, line _____

Schedule G, line _____

3.2

Ragster Investment Group, Inc

Name

2607 Summer Tree Circle

Street

Arlington

TX

76006

City

State

ZIP Code

Schedule D, line _____

Schedule E/F, line 4.34

Schedule G, line _____

3.3

Ragster Investment Group, Inc

Name

2607 Summer Tree Circle

Street

Arlington

TX

76006

City

State

ZIP Code

Schedule D, line _____

Schedule E/F, line 4.26

Schedule G, line _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.4	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Apt #1049 Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.6</u> <input type="checkbox"/> Schedule G, line _____
3.5	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.65</u> <input type="checkbox"/> Schedule G, line _____
3.6	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.8</u> <input type="checkbox"/> Schedule G, line _____
3.7	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.50</u> <input type="checkbox"/> Schedule G, line _____
3.8	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.67</u> <input type="checkbox"/> Schedule G, line _____
3.9	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.14</u> <input type="checkbox"/> Schedule G, line _____
3.10	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.7</u> <input type="checkbox"/> Schedule G, line _____
3.11	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.4</u> <input type="checkbox"/> Schedule G, line _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.12	<p>Ragster Investment Group, Inc.</p> <p>Name 2607 Summer Tree Circle #1049 Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.25</u> <input type="checkbox"/> Schedule G, line _____
3.13	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.48</u> <input type="checkbox"/> Schedule G, line _____
3.14	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.43</u> <input type="checkbox"/> Schedule G, line _____
3.15	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.19</u> <input type="checkbox"/> Schedule G, line _____
3.16	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.39</u> <input type="checkbox"/> Schedule G, line _____
3.17	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.11</u> <input type="checkbox"/> Schedule G, line _____
3.18	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.9</u> <input type="checkbox"/> Schedule G, line _____
3.19	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.1</u> <input type="checkbox"/> Schedule G, line _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.20	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.2</u> <input type="checkbox"/> Schedule G, line _____
3.21	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.61</u> <input type="checkbox"/> Schedule G, line _____
3.22	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.54</u> <input type="checkbox"/> Schedule G, line _____
3.23	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.29</u> <input type="checkbox"/> Schedule G, line _____
3.24	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.5</u> <input type="checkbox"/> Schedule G, line _____
3.25	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.36</u> <input type="checkbox"/> Schedule G, line _____
3.26	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.27</u> <input type="checkbox"/> Schedule G, line _____
3.27	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.37</u> <input type="checkbox"/> Schedule G, line _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.28	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.32</u> <input type="checkbox"/> Schedule G, line _____
3.29	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.52</u> <input type="checkbox"/> Schedule G, line _____
3.30	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.68</u> <input type="checkbox"/> Schedule G, line _____
3.31	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.46</u> <input type="checkbox"/> Schedule G, line _____
3.32	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.57</u> <input type="checkbox"/> Schedule G, line _____
3.33	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.16</u> <input type="checkbox"/> Schedule G, line _____
3.34	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.69</u> <input type="checkbox"/> Schedule G, line _____
3.35	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.64</u> <input type="checkbox"/> Schedule G, line _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.36	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.33</u> <input type="checkbox"/> Schedule G, line _____
3.37	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.53</u> <input type="checkbox"/> Schedule G, line _____
3.38	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.71</u> <input type="checkbox"/> Schedule G, line _____
3.39	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.70</u> <input type="checkbox"/> Schedule G, line _____
3.40	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.15</u> <input type="checkbox"/> Schedule G, line _____
3.41	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.20</u> <input type="checkbox"/> Schedule G, line _____
3.42	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.55</u> <input type="checkbox"/> Schedule G, line _____
3.43	<p>Ragster Investment Group, Inc</p> <p>Name 2607 Summer Tree Circle Street Arlington TX 76006 City State ZIP Code</p>	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line <u>4.49</u> <input type="checkbox"/> Schedule G, line _____

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.44 Ragster Investment Group, Inc

Name
2607 Summer Tree Circle
Street
Arlington TX 76006
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line 4.42
 Schedule G, line _____

3.45 Ragster Investment Group, Inc

Name
2607 Summer Tree Circle
Street
Arlington TX 76006
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line 4.3
 Schedule G, line _____

3.46

Name
Street
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.47

Name
Street
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.48

Name
Street
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.49

Name
Street
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.50

Name
Street
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.51

Name
Street
City State ZIP Code

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (if known) _____			

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

12/15

Official Form 106I

Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Debtor 1

Employed
 Not employed

Debtor 2 or non-filing spouse

Employed
 Not employed

Occupation

Driver

Lyft/Uber/Lifetime CDL Training Academy

Employer's name

Employer's address

2607 Summer Tree Circle

Number Street
#1049

_____</

For Debtor 1**For Debtor 2 or
non-filing spouse**

Copy line 4 here → 4. \$ 0.00 \$ _____

5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ _____
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ _____
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ _____
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ _____
5e. Insurance	5e. \$ <u>0.00</u>	\$ _____
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ _____
5g. Union dues	5g. \$ <u>0.00</u>	\$ _____
5h. Other deductions. Specify: _____	5h. + \$ <u>0.00</u>	+ \$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$ 0.00 \$ _____

7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 0.00 \$ _____

8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a. \$ 1,166.05 \$ _____

8b. Interest and dividends

8b. \$ 0.00 \$ _____

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c. \$ 0.00 \$ _____

8d. Unemployment compensation

8d. \$ 0.00 \$ _____

8e. Social Security

8e. \$ 0.00 \$ _____

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: _____ 8f. \$ 0.00 \$ _____

8g. Pension or retirement income

8g. \$ 0.00 \$ _____

8h. Other monthly income. Specify: _____

8h. + \$ 0.00 + \$ _____

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

9. \$ 1,166.05 \$ _____

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ 1,166.05 + \$ _____ = \$ 1,166.05

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____ 11. + \$ _____

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the *Summary of Your Assets and Liabilities and Certain Statistical Information*, if it applies

12.

\$ 1,166.05

Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Fill in this information to identify your case:

Debtor 1	Timothy Ragster	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: Northern District of Texas		
(State)		
Case number (If known)		

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?

No
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

daughter

18

No

daughter

12

No

son

21

No

No

No

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ 1,150.00

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

4a. \$ 0.00
 4b. \$ 0.00
 4c. \$ 0.00
 4d. \$ 0.00

Your expenses	
5. Additional mortgage payments for your residence, such as home equity loans	5. \$ 0.00
6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 90.00
6b. Water, sewer, garbage collection	6b. \$ 45.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 155.00
6d. Other. Specify: _____	6d. \$ 0.00
7. Food and housekeeping supplies	7. \$ 500.00
8. Childcare and children's education costs	8. \$ 0.00
9. Clothing, laundry, and dry cleaning	9. \$ 30.00
10. Personal care products and services	10. \$ 80.00
11. Medical and dental expenses	11. \$ 0.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 760.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 100.00
14. Charitable contributions and religious donations	14. \$ 0.00
15. Insurance.	
Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ 0.00
15b. Health insurance	15b. \$ 0.00
15c. Vehicle insurance	15c. \$ 155.00
15d. Other insurance. Specify: _____	15d. \$ 0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0.00
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ 1,234.00
17b. Car payments for Vehicle 2	17b. \$ 0.00
17c. Other. Specify: _____	17c. \$ 0.00
17d. Other. Specify: _____	17d. \$ 0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ 580.00
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ 0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ 0.00
20b. Real estate taxes	20b. \$ 0.00
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e. Homeowner's association or condominium dues	20e. \$ 0.00

Debtor 1

Timothy Ragster

First Name Middle Name Last Name

Case number (if known)

21. Other. Specify: _____

21. +\$ 0.00

+\$ _____

+\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 4,879.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22b. \$ _____

22c. \$ 4,879.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \$ 1,166.05

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 4,879.00

23c. Subtract your monthly expenses from your monthly income.

The result is your monthly net income.

23c. \$ -3,712.95

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the Northern District of Texas			
Case number (If known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

 /s/ Timothy Ragster

Signature of Debtor 1

Date 06/30/2025

MM / DD / YYYY



Signature of Debtor 2

Date

MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (if known) _____			

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
6 Meera ct Number Street	From 08/10/2017 To 09/18/2023	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
Mansfield City	TX 76063 State ZIP Code	Number Street City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
City State ZIP Code	From _____ To _____	Number Street City State ZIP Code	<input type="checkbox"/> Same as Debtor 1 From _____ To _____

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1		Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 7,465.77	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For last calendar year: (January 1 to December 31, <u>2024</u> <u>YYYY</u>)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 26,075.69	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, <u>2023</u> <u>YYYY</u>)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$ 42,771.36	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	Debtor 1		Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.
From January 1 of current year until the date you filed for bankruptcy:		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
For last calendar year: (January 1 to December 31, _____)		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____
For the calendar year before that: (January 1 to December 31, _____)		\$ _____	\$ _____
		\$ _____	\$ _____
		\$ _____	\$ _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$8,575* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$8,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/28 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	_____	
City State ZIP Code	_____	_____	_____	
Creditor's Name	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	_____	
City State ZIP Code	_____	_____	_____	
Creditor's Name	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	_____	
City State ZIP Code	_____	_____	_____	

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title: BMO HARRIS BANK, N.A., vs. TIMOTHY RAGSTER	JUDGEMENT; Date filed: 05/31/2023	17th Judicial District Court Court Name 401 W. Belknap Street Number Street Fort Worth TX 76196 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number 348-42276	BREACH OF CONTRACT; AND BREACH OF PERSONAL GUARANTY; Date filed: 06/05/2023	IN THE SUPERIOR COURT OF THE STA Court Name 201 W. Jefferson Number Street Phoenix AZ 85003 City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case title: RETAIL CAPITAL LLC, DBA CREDIBLY vs. GLOBAL EVOLUTION LOGISTICS LLC, DBA GLOBAL EVOLUTION LOGISTICS, et al.			
Case number CV2023-008419			

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

Describe the property	Date	Value of the property
Creditor's Name Number Street City State ZIP Code		\$ _____
Explain what happened		
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		
Describe the property	Date	Value of the property
Creditor's Name Number Street City State ZIP Code		\$ _____
Explain what happened		
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1 **Timothy Ragster**
First Name Middle Name Last Name

Case number (if known) _____

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No

Yes. Fill in the details.

Describe the action the creditor took		Date action was taken	Amount
Creditor's Name			
Number	Street	\$ _____	
City _____ State _____ ZIP Code _____		Last 4 digits of account number: XXXX- _____	

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		_____	\$ _____
Number Street		_____	\$ _____
City _____ State _____ ZIP Code _____			
Person's relationship to you _____			

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		_____	\$ _____
Number Street		_____	\$ _____
City _____ State _____ ZIP Code _____			
Person's relationship to you _____			

Debtor 1 **Timothy Ragster**
First Name Middle Name Last Name

Case number (*if known*) _____

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name <hr/> <hr/>		<hr/>	\$ <hr/>
Number Street <hr/>		<hr/>	\$ <hr/>
City State ZIP Code <hr/>			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		\$ _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Guy Harvey Holman, PLLC Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>8330 Lyndon B Johnson Fwy</u>	Cash payment for bankruptcy legal services incl \$338.00 court filing fee, \$50.00 credit report	<u>05/02/2023</u>	\$ <u>2,300.00</u>
<u>Suite 445</u>			\$ <u> </u>
<u>Fort Worth</u>	<u>TX</u>	<u>76102-363</u>	
City	State	ZIP Code	
Email or website address			
<u>Debtor</u>			
Person Who Made the Payment, if Not You			

Debtor 1 **Timothy Ragster**
 First Name Middle Name Last Name

Case number (if known) _____

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$ _____
Number Street			\$ _____
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$ _____
Number Street			\$ _____
City State ZIP Code			

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer			_____
Number Street			
City State ZIP Code			
Person's relationship to you			
Person Who Received Transfer			_____
Number Street			
City State ZIP Code			
Person's relationship to you			

Debtor 1 **Timothy Ragster**
First Name Middle Name Last Name

Case number (if known) _____

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust	_____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX- _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
Name of Financial Institution Number Street City State ZIP Code	XXXX- _____ <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Debtor 1 Timothy Ragster
First Name Middle Name Last Name

Case number (if known) _____

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
Name of Storage Facility	Name	<input type="checkbox"/> No <input type="checkbox"/> Yes
Number Street	Number Street	
City State ZIP Code		
City State ZIP Code		

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name		\$ _____
Number Street	Number Street	
City State ZIP Code		

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_____
Number Street	Number Street	
City State ZIP Code		
City State ZIP Code		

Debtor 1 Timothy Ragster
First Name Middle Name Last Name

Case number (if known) _____

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	_____
Number Street	Number Street	_____
City	State ZIP Code	_____
City	State ZIP Code	_____

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title Court Name	Number Street	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number City State ZIP Code	City State ZIP Code	_____

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Alexander 360 Investment Inc Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
1301 E Debbie LN Number Street	_____	EIN: <u>9</u> <u>3</u> <u>-</u> <u>4</u> <u>1</u> <u>8</u> <u>5</u> <u>9</u> <u>0</u> <u>6</u>
STE 102 PMB 902 Mansfield TX 76063 City State ZIP Code	Name of accountant or bookkeeper Smriti Karki, MBA, MPA, CPA	Dates business existed From <u>10/31/2023</u> To <u>Current</u>
Alexander Dedicated Transportation LLC Business Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
1301 E Debbie LN Number Street	_____	EIN: <u>9</u> <u>3</u> <u>-</u> <u>4</u> <u>5</u> <u>5</u> <u>7</u> <u>5</u> <u>8</u> <u>6</u>
STE 102 PMB 902 Mansfield TX 76063 City State ZIP Code	Name of accountant or bookkeeper Smriti Karki, MBA, MPA, CPA	Dates business existed From <u>11/21/2023</u> To <u>Current</u>

Debtor 1 **Timothy Ragster**
First Name Middle Name Last Name

Case number (if known) _____

Alexander Holding Company LLC
Business Name

1301 E Debbie LN
Number Street

STE 102 PMB 902

Mansfield TX 76063
City State ZIP Code

Describe the nature of the business

Employer Identification number
Do not include Social Security number or ITIN.

EIN: 8 2 -2 2 0 8 8 4 3

Dates business existed

From 07/19/2017 **To** Current

Name of accountant or bookkeeper

Smriti Karki, MBA, MPA, CPA

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name _____

MM / DD / YYYY _____

Number Street _____

City _____ State _____ ZIP Code _____

Part 12: Sign Below

I have read the answers on this **Statement of Financial Affairs** and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Timothy Ragster
Signature of Debtor 1

 _____
Signature of Debtor 2

Date 06/30/2025

Date _____

Did you attach additional pages to **Your Statement of Financial Affairs for Individuals Filing for Bankruptcy** (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____ . Attach the **Bankruptcy Petition Preparer's Notice, Declaration, and Signature** (Official Form 119).

Timothy Ragster

Debtor 1

First Name

Middle Name

Last Name

Case number (if known) _____

Continuation Sheet for Official Form 107

9) Lawsuits

Case Title: VOLVO FINANCIAL SERVICES, A DIVISION OF VFS US LLC C/O KANE RUSSELL COLEMAN & LOGAN PC

Case Number: 2023-007564-3

Court Name: In the Tarrant County Court at the Law #3

Court Address: 100 W. Weatherford Street, Fort Worth, TX 76196

Case Status: Pending

Nature of the case: Judgement; Date filed: 10/13/2023

Case Title: SIGNATURE FINANCIAL, LLC VS. TIMOTHY A. RAGSTER AND TRINISE R. RAGSTER

Case Number: 236-340691-23

Court Name: In the District Court 236th Judicial District Tarrant County, Texas

Court Address: 8080 Park Lane, Suite 700, Dallas, TX 75231-5920

Case Status: Pending

Nature of the case: JUDGEMENT; Date filed: 04/20/2023

Case Title: WILLIAM R. WEISS ENT INC. dba TNT SALES VS. GLOBAL EVOLUTION LOGISTICS LLC; TIMOTHY RAGSTER

Case Number: 2024-007993-2

Court Name: IN THE TARRANT COUNTY LAW COURT NO#2

Court Address: 100 W. Weatherford Street, Fort Worth, TX 76196-0240

Case Status: Pending

Nature of the case: JUDGEMENT; Date filed: 04/20/2023

Case Title: BMO HARRIS BANK N.A VS. ALEXANDER HOLDING COMPANY, LLC, ET AL AND TIMOTHY RAGSTER

Case Number: 017-341512-

Court Name: 17th District Court Tarrant District

Court Address: , ,

Case Status: Pending

Nature of the case: JUDGEMENT; Date filed: 04/17/2023

Timothy Ragster

Debtor 1

First Name

Middle Name

Last Name

Case number (if known) _____

Continuation Sheet for Official Form 107

27) Businesses

Business Name: Ragster Investment Groups Inc

1301 E Debbie LN STE 102 PMB 902

Mansfield, TX 76063

Describe the Nature of the business:

EIN: 270957747

Dates business existed: From: 09/20/2009 To: Current

Business Name: Lifetime CDL Training Academy LLC

1301 E Debbie LN STE 102 PMB 902

Mansfield, TX 76063

Describe the Nature of the business:

EIN: 934348636

Dates business existed: From: 11/10/2023 To: Current

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the Northern District of Texas			
Case number (if known)			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

- For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <u>Unify Financial Fcu</u> Description of property securing debt: <u>2022 toyato trundra</u>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Creditor's name: <u>Corporation Service Company, As Represent</u> Description of property securing debt: _____	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Creditor's name: _____ Description of property securing debt: _____	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Creditor's name: _____ Description of property securing debt: _____	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in **Schedule G: Executory Contracts and Unexpired Leases** (Official Form 106G), fill in the information below. Do not list real estate leases. **Unexpired leases** are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Timothy Ragster

Signature of Debtor 1

Date 06/30/2025

MM / DD / YYYY

X

Signature of Debtor 2

Date

MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	Timothy Ragster		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Northern District of Texas			
Case number (If known)			

Check one box only as directed in this form and in Form 122A-1Supp:

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
----------------------	--

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).

3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.

\$0.00 \$0.00

\$0.00 \$0.00

\$0.00 \$0.00

5. Net income from operating a business, profession, or farm

Debtor 1 Debtor 2

\$2,133.05 \$0.00

Gross receipts (before all deductions)

-\$967.00 -\$0.00

Ordinary and necessary operating expenses

Copy here → \$1,166.05 \$0.00

Net monthly income from a business, profession, or farm

\$1,166.05 \$0.00

6. Net income from rental and other real property

Debtor 1 Debtor 2

\$0.00 \$0.00

Gross receipts (before all deductions)

-\$0.00 -\$0.00

Ordinary and necessary operating expenses

Copy here → \$0.00 \$0.00

Net monthly income from rental or other real property

\$0.00 \$0.00

7. Interest, dividends, and royalties

\$0.00 \$0.00

Debtor 1 **Timothy Ragster**
 First Name Middle Name Last Name

Case number (if known) _____

Column A
Debtor 1

Column B
**Debtor 2 or
 non-filing spouse**

8. Unemployment compensation

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you \$ 0.00
 For your spouse \$ 0.00

\$ 0.00

\$ 0.00

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ 0.00

\$ 0.00

10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

+ \$ 0.00

+ \$ 0.00

\$ 1,166.05

\$ 0.00

= \$ 1,166.05

Total current monthly income

11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11..... Copy line 11 here 

\$ 1,166.05

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

\$ 13,992.60

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

TX

Fill in the number of people in your household.

4

Fill in the median family income for your state and size of household. 13.

\$ 110,719.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*. Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*. Go to Part 3 and fill out Form 122A-2.

Debtor 1 **Timothy Ragster**
First Name Middle Name Last Name

Case number (if known) _____

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Timothy Ragster

Signature of Debtor 1

Date 06/30/2025

MM / DD / YYYY

X

Signature of Debtor 2

Date

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

ACG Equipment Finance
9436 Hamilton Drive
Mentor, OH 44060-8708

AIS Portfolio Services, LLC
4515 N SANTA FE AVE
Oklahoma City, OK 73118

Alexnadra E. Rossetti
Thompson Coburn LLP 2100 Ross Avenue
Suite 3200
Dallas, TX 75201

Amazon Business Card
P.O. Box 6031
Carol Stream, IL 60197-6031

America Inc.,
One Pierce Place
Suite 1100
Itasca, IL 60143

American Bank, N.A. d/b/a ACG Equipment Finan
111 Congress Aveue
Austin, TX 78701-4093

American Express
PO Box 6031
Carol Stream, IL 60197-6031

American Express National Bank
C/O Becket and Lee LLP
PO Box 3001
Malvern, PA 19355-0701

Amex/Cbna
Po Box 8218
Mason, OH 45040

Ascentium Capital LLC
PO Box 979059
Suite 1210
Ft. Worth,

Ascentium Capital LLC
PO Box 979059
Miami, FL 33197-9059

Attorney General of Texas
Bankruptcy Division
P.O. Box 12548
Austin, TX 78711-2540

Banc of America Leasing & Capital, LLC c/o Cl
Attn: Andrew G. Edson
901 Main Street Suite 6000
Dallas, TX 75202-3748

Banterra Bank
3201 Banterra Drive
PO Box 310
Marion, IL 62959-0310

BMO HARRIS BANK N.A. C/O ELIAS M. YAZECK
4119 Montrose Blvd
Suite 470
Houston, TX 77006

BMO HARRIS BANK N.A., C/O CHRIS HALGREN
1111 Louisiana Street
Suite 4500
Houston, TX 8701

BMO Harris Bank NA
PO Box 35704
Billings, MT 59107-5704

Capital One
P.O. Box 71141
Charolette, NC 28272-1141

Capital One
Po Box 85064
Glen Allen, VA 23058

Capital One, N.A., c/o AIS Portfolio Service
4515 N Santa Fe Ave. Dept. APS
Oklahoma City, OK 73118-901

Capitol One, c/o AIS
4515 N. Santa Fe Ave.
Oklahoma City, OK 73118-7901

Ccb/Zalescc
Po Box 182120
Columbus, OH 43218

Comptroller of Public Accts Revenue Acctg Div
P.O. Box 13528
Austin, TX 78711

Corporation Service Company, As Representativ
PO BOX 2576
Springfield, IL 62708-2576

Credence Resource Mana
17000 Dallas Pkwy Ste 20
Dallas, TX 75248

Discover Bank
Po Box 15316
Wilmington, DE 19850

Engs Commercial Finance Co. c/o Kemp Smith LL
221 N. Kansas, Ste. 1700
El Paso, TX 79901-1401

Global Evolution Logistics, LLC
521 N. Walnut Creek Drive
Mansfield, TX 76063-3205

Internal Revenue Service
Centralized Insolvency Operations
P.O.Box 7346
Philadelphia, PA 19101-7346

Internal Revenue Service
1100 Commerce St
Dallas, TX 75242-1100

Internal Revenue Service
Mail Code DAL - 5020
1100 Commerce St.
Dallas, TX 75242

IPFS Corporation
30 Montgomery Street
Suite 501
Jersey City, NJ 07302-3821

Jpmcb Card
301 N Walnut St, Floor 09
Wilmington, DE 19801

Jpmcb Card
201 N Walnut St
Wilmington, DE 19801

Jpmcb Card
800 Brooksedge Blvd
Westerville, OH 43081

JPMorgan Chase Bank, N.A.
C/O National Bankruptcy Services, LLC
PO Box 9013

Landstar Contractor Financing Inc.
13410 Sutton Park Dr. South
Jacksonville, FL 32224-5270

LBC Capital Inc. c/o Quilling, Selander, Lown
Attn: Kenneth A. Hill
2001 Bryan Street Suite 1800
Dallas, TX 75201-3071

Linebarger, Goggan Blain & Sampson
2777 N. Stemmons Fwy
Suite 100
Dallas, TX 75207

Lvnv Funding Llc
Po Box 10497
Greenville, SC 29603

Marlin Leasing Corporation
PO Box 13604
Philadelphia, PA 19101-3604

Mercedes-Benz Financial
13650 Heritage Parkway
Fort Worth, TX 76177-5323

Midland Credit Managem
San Diego, CA

Mitsubishi HC Capital America, Inc. c/o Kemp
221 N. Kansas, Ste. 1700
El Paso, TX 79901-1401

Msdhs/Metss
750 North State St
Jackson, MS 39202

Navient
Po Box 9500
Wilkes Barre, PA 18773

Navient
Po Box 9655
Wilkes Barre, PA 18773

Northpoint Commercial Finance LLC c/o Quillin
Attn: Kenneth A. Hill
2001 Bryan Street Suite 1800 PMB 902
Mansfield, TX 76063-3376

Northpoint Commercial Finance, LLC
11675 Rainwater Drive, Suite 450
Alpharetta, GA 30009-8686

Oag Child Support
Po Box 12017
Austin, TX 78711

Portfolio Recov Assoc
120 Corporate Blvd Ste 1
Norfolk, VA 23502

Quantum 222 Trust
9300 Metcalf Avenue
Overland, KS 66212-1463

Ragster Investment Group, Inc
2607 Summer Tree Circle
Arlington, TX 76006

Ragster Investment Group, Inc
2607 Summer Tree Circle
Apt #1049
Arlington, TX 76006

Ragster Investment Group, Inc.
1301 Debbie Lane
STE 102
Mansfield, TX 76063-3376

Ragster Investment Group, Inc.
2607 Summer Tree Circle
Arlington, TX 76006

Retail Capital LLC, DBA Credibly c/o Laraib M
1501 W. FOUNTAINHEAD PKWY
SUITE 630
Tempe, AZ 85282

Rosen Systems, Inc.
2323 Langford St.
Dallas, TX 75208-2122

Santander Bank, N.A.
3 Huntington Quadrangle
Suite 101 N
Melville, NY 11747-4623

Santander Bank, N.A. c/o Padfield & Stout, LL
420 Throckmorton Street
Suite 1210
Ft. Worth, TX

Servicefin
555 South Federal Highway
Boca Raton, FL 33432

SG Equipment Finance USA Corp.
c/o Peter Billgert
480 Washington Blvd
Jersey City, NJ 07310-2053

Signature Financial, LLC
C/O Bronster, LLP Attn: J
156 West 56th Street, Suite 902
New York, NY 10019-4008

SIGNATURE FINANCIAL, LLC C/O CONDON TOBIN SLA
8080 Park Lane, Suite 700
901 Main Street Suite 6000
Dallas, 75231-5920

Signature Financial, LLC Condon Tobin Sladek
8080 Park Lane, Suite 700
901 Main Street Suite 6000
Dallas, TX 75231-5920

Small Business Lending Division
PO Box 29482
Phoenix, AZ 85038-9482

Springoaks
1400 Crossways Boulevard Ste 1
Chesapeake, VA 23320

Sumitomo Mitsui Finance & Leasing Co.
666 Third Avenue, 8th Floor
New York, NY 10017-4033

Suntrust Bk
Pob 3303
Tampa, FL 33601

Syncb/Ashh
C/O Po Box 981439
El Paso, TX 79998

Syncb/Ccdstr
C/O Po Box 965036
Orlando, FL 32896

Texas Comptroller of Public Accounts
Revenue Accting Div,-Banker Section
P.O. Box 13528
Austin, TX 78711-3528

Texas Comptroller of Public Accounts, Revenue
c/o Sherri Simpson,
PO Box 12548
Austin, TX 78711-2548

Texas Workforce Commission
101 E. 15th St.
Austin, TX 78778-0001

The Lark Law Firm
777 Main Street
Fort Worth, TX 76102

Tx Trust
425 W Jefferson
Grand Prairie, TX 75050

U.S. Small Business Administration
200 W. Santa Ana Blvd.
Suite 740
Santa Ana, CA 92701-7534

U.S. Small Business Administration
14925 Kingsport Road
Fort Worth, TX 76155-2243

U.S. Small Business Administration
SBA Disaster Loan Service
1545 Hawkins Blvd Suite 202
El Paso, TX 79925-2654

UniFi Equipment Finance, Inc.
Attn: Doc Dept.
801 W. Ellsworth Rd.
Ann Arbor, MI 48108-314

UniFi Equipment Finance, Inc. c/o Wright Law
C/o Wright Law Group, PLLC
P. O. Box 105603 PMB 84356
Atlanta, GA 30348-5603

Unify Financial Fcu
9323 Bellanca Ave
Los Angeles, CA 90045

United States Trustee
1100 Commerce St
Room 976
Dallas, TX 75242

US Attorney General
Dept of Justice/Main Justice Bldg
10th & Constitution Ave NW
Washington, DC 20530-0001

US Trustee Office
1100 Commerce St.
Room 976
Dallas, TX 75242

Volvo Financial Services
Attn: Customer Service 7025 Albert Pick
Suite 105
Greensboro, NC 27402-6131

Volvo Financial Services, A Division of VFS U
Michael P. Ridulfo
5151 San Felipe Suite 800
Houston, TX 77056

Wells Fargo SBL
PO Box 29482
Phoenix, AZ 85038-9482

Wfbna Card
Po Box 14517
Des Moines, IA 50306

Williams R. Weiss, ENT, INC. dba TNT SALE C/O
11700 PRESTON ROAD
STE 660-619
Dallas, TX 75230

United States Bankruptcy Court
Northern District of Texas

In re: Timothy Ragster

Case No.

Debtor(s)

Chapter 7

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 06/30/2025

/s/ Timothy Ragster

Signature of Debtor

Signature of Joint Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 — Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245	filing fee
\$78	administrative fee
+	
<u>\$15</u>	<u>trustee surcharge</u>
<u>\$338</u>	<u>total fee</u>

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee	
+	\$571	administrative fee
	\$1,738	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+	\$78 administrative fee
<hr/>	
\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+	\$78 administrative fee
<hr/>	
\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

<http://www.uscourts.gov/forms/bankruptcy-forms>

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

In Alabama and North Carolina, go to: <http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

United States Bankruptcy Court

Northern District of Texas

In re Timothy Ragster

Case No. _____

DebtorChapter ⁷ _____**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

 FLAT FEE

For legal services, I have agreed to accept	\$ 1,912.00
Prior to the filing of this statement I have received.....	\$ 1,912.00
Balance Due.....	\$ 0.00

 RETAINER

For legal services, I have agreed to accept a retainer of	\$ _____
The undersigned shall bill against the retainer at an hourly rate of	\$ _____
[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.	

2. The source of the compensation paid to me was:

Debtor Other (specify)

3. The source of compensation to be paid to me is:

Debtor Other (specify)

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
Any work related to Contested Matters and Adversary Proceedings

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/30/2025

/s/ Guy Holman, 24095171

Date

Signature of Attorney

Guy Harvey Holman, PLLC

Name of law firm
8330 Lyndon B Johnson Fwy
Suite 445
Dallas, TX 75243